Form (RF-3)

# ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level	produced by rate revision effective	4-15-05 +6.5
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1 Automobile Fishilit - Drivete		
Automobile Liability-Private     Passenger Commercial	831, 615	+4. 4%
Automobile Physical Damage	831, 013	<u> </u>
Private Passenger Commercial	752, 644	-5. 3%
Liability Other Than Auto	732, 044	ე. ეგ
4. Burglary and Theft	<del></del>	
5. Glass		
6. Fidelity		
7. Surety	****	
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		<u> </u>
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		
Does filing only apply to certain territory  Memorandum	(territories) or certain classes?	If so, specify: See attached Actuaria
Brief description of filing. (If filing follows rate	es of an advisory organization, spe	cify organization): See cover Letter
<u> </u>		
*Adjusted to reflect all prior rate changes. **Change in Company's premium level whic	h will result from application of new	rates.
	Alliad Duas	centur & Caqualty Ingurance Company
	Allled Prop	perty & Casualty Insurance Company Name of Company
		Hame of Company
	Steve	Merchant - Filing Specialist
		Official – Title

	Change in Company's premium or rate level		
	revision effective	July 4, 2005	_ <del></del> ·
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent Change (+ or -)**
1.	Automobile Liability ***		
1.	Private Passenger		
	Commercial	274,446	+17.5%
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial	185.878	+17.6%
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
-			
	filing only apply to certain territory (territories) es? If so, specify:  No	or certain	
ciass	es? If so, specify: No		<del></del>
Brief	description of filing. (If filing follows rates of a	n advisory	
		his filing revises our company Loss cost multi	pliers and
	pany exceptions to ISO.		
20111	AND THE PERSON OF THE PERSON O		

- \* Adjusted to reflect all prior rate changes. Written premium for policies effective in 12 months ending in June 30, 2004.
- \*\* Change in Company's premium level which will result from application of new rates.
- \*\*\* Includes UM data.

**Indemnity Company** H29219D



Allstate Indemnity Company\_

Name of Company

	Change in Company's premium or rate level p		
	revision effective	July 4, 2005	··
	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability ***		
	Private Passenger		
	Commercial	5,749,028	+15.4%
<u>.</u>	Automobile Physical Damage	<del></del>	
	Private Passenger		
	Commercial	3,541,498	+14.8%
3.	Liability Other Than Auto	<del></del>	
1.	Burglary and Theft		
5.	Glass	<del> </del>	
<b>5</b> .	Fidelity		
7.	Surety		
3.	Boiler and Machinery		
€.	Fire		
<b>)</b> .	Extended Coverage		
	Inland Marine		
2.	Homeowners		
<b>}.</b>	Commercial Multi-Peril		
١.	Crop Hail		
i,	Other		
	Line of Insurance		
D	Giine and contain territory (territories) on	aostoin.	
	filing only apply to certain territory (territories) or es? If so, specify: No	Contain	

- \* Adjusted to reflect all prior rate changes. Written premium for policies effective in 12 months ending in June 30, 2004.
- \*\* Change in Company's premium level which will result from application of new rates.
- \*\*\* Includes UM data.

H29219D



Allstate Insurance Company

Name of Company

Form (RF-3)

### SUMMARY SHEET

Change in Company's	premium	or	rate	level	produced	by	rate
revision effective	7/1/2005						

(1)	(2) Annual Premium	(3) Percent
<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -) **</u>
1. Automobile Liability Private Passenger Commercial 2. Automobile Physical Damage	1,528,525	-20.2%
Private Passenger Commercial 3. Liability Other Than Auto 4. Burglary and Theft	1,303,832	0.0%
5. Glass 6. Fidelity 7. Surety		
8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine		
12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail		
15. Other Line of Insurance		(-total = -10.9%)
Does filing only apply to certain If so, specify: N/A	territory (territories)or	certain classes?
Brief description of filing. (If organization)	filing follows rates of a  1): We are filing to adop	n advisory ot current ISO loss
costs and revise our VFIS-specific		

American Alternative Insurance Corporation Name of Company

> Stephen J. Corbett Vice President

Official - TI HISION OF INSURANCE STATE OF ILLINOIS/IDEPR

MAR 2 8 2005

SPRINGFIELD, ILLINOIS

H29219D

<sup>\*</sup> Adjusted to reflect all prior rate changes.

<sup>\*\*</sup> Change in Company's premium level which will result from application of new rates.

	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger		
	Commercial	\$852,063	+5.0%
2.	Automobile Physical Damage Private Passenger		
	Commercial	\$208,646	+3.2%
3.	Liability Other Than Auto		
4.	Burglary and Theft		-
5.	Glass		
6.	Fidelity		<del></del>
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		· ·
0.	Extended Coverage		
1.	Inland Marine		
2.	Homeowners		
3.	Commercial Multi-Peril		
4.	Crop Hail		
5.	Other		
	Line of Insurance		
oes fi	ling only apply to certain territory (te	erritories) or certain classes? If so, specify:	

\* Adjusted to reflect all prior rate changes.

\*\* Change in Company's premium level which will result from application of new rates.

American Hardware Mutual Ins. Co
Name of Company

Michael Wiseman,FCAS,Treasurer
Official - Title

H29219D



Change in Company's premium or rate level produced by rate revision effective **July 15, 2005** 

	_	Annual Premium	Percent
	<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial	<b>\$388,705</b>	7.7%
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial	\$141,414	19.5%
3.	Liability Other Than Auto	<u> </u>	
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		··· ·· · ·
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Workers Compensation		
D٥	es filing only apply to certain territory (	territories) or certain classes? If so. s	pecify:
No	<del>-</del>		•

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Filing to adopt ISO Loss Costs (CA-2004-BRLA1 and CA-2004-RUMLC) and Rules (CA-04-OUM1,CA-04-OR and CA-04-RMERU); revising our Loss Cost Multipliers. We are also revising our Schedule Rating from +/-25 to +/-40% and lower premium threshold eligibility to \$500.

- \* Adjusted to reflect all prior rate changes.
- \*\* Change in Company's premium level which will result from application of new rates.

Citizens Insurance Company of America

Name of Company

FEIN 38-0421730

Judith E. Rider, Senior Pricing Analyst

Official - Title

Change in Company's premium or rate level produced by rate revision effective **July 15, 2005** 

	1	2	3
	<u>Coverage</u>	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial	<u>\$241,591</u>	+0.3%
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial	\$91,007	-11.1%
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery	·	
9.	Fire		<u> </u>
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		**************************************
14.	Crop Hail		
	Workers Compensation		
Doe No.	es filing only apply to certain territory (territor	ies) or certain classes? If so, specify	:
Filir and	of description of filing. (If filing follows rates of the adopt ISO Loss Costs (CA-2004-BRLA CA-04-RMERU); revising our Loss Cost Mu	1 and CA-2004-RUMLC) and Rules ( altipliers. We are also revising our Sc	CA-04-OUM1,CA-04-OF
ιο +	/-40% and lower premium threshold eligibilit	y to 4000.	

- \* Adjusted to reflect all prior rate changes.
- \*\* Change in Company's premium level which will result from application of new rates.

Citizens Insurance Company of Illinois			
Name of Company			
FEIN	36-4123481		
Judith E. Rider, Se	enior Pricing Analyst		
Official - Title			

	Change in (	Company's premium or rat	e level produced by rate revision effective	04-01-05
		(1)	(2) Annual Premium	(3) Percent
		Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automol	oile Liability		
	Private	Passenger	\$354,540	Less than 1%
	Comme	ercial	\$1,718,980	Less than 1%
2.	Automol	oile Physical Damage		
	Private	Passenger	\$287,969	0%
	Comme	ercial	\$748,585	0%
3.	Liability	Other Than Auto		
4.	-	and Theft		
5.	Glass			
6.	Fidelity			
7.	Surety			
8.	•	nd Machinery		
9.	Fire	•		
10.	Extended	d Coverage		
11.	Inland M	•		
12.	Homeow	mers .		
13.	Commer	cial Multi-Peril		
14.	Crop Ha	il		
15.	Other	Garage Liability	\$53,161	0%
		Garage Phys Dmg	\$49,893	0%
		Line of Insurance		
		pply to certain territory (to to Hired and Non-Owned	erritories) or certain classes? If so, specify:	
1 68	, applicable	to Tiffed and Tron-Owned	1 LUIOS	
D-1:4	ئەسلىمىداد	of filing (If filing fallows	s water of an advisory organization, specify s	vranization):
		of filing. (If filing follows on to Rules 89 & 90.	s rates of an advisory organization, specify of	ngamzanon).
Kule/	Kate Kevisio	on to Rules by & 90.		

- \* Adjusted to reflect all prior rate changes.
- \*\* Change in Company's premium level which will result from application of new rates.



Frankenmuth Mutual Insurance Co.

Name of Company

Alice F. Jaruzel, AIS
Commercial Analyst
Official - Title

H29219D

Change in Company's premium or rate level produced by rate revision effective
July 15, 2005

			<del></del>
1		2	3
	Coverage	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial	\$892,883	0.1%
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial	\$299,785	-9.9%
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass	<u></u>	
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Workers Compensation	-	
Do:	• • • • • • • • • • • • • • • • • • • •	erritories) or certain classes? If so, spec	cify:

and CA-04-RMERU); revising our Loss Cost Multipliers. We are also revising our Schedule Rating from +/-25% to +/-40% and lower premium threshold eligibility to \$500.

- \* Adjusted to reflect all prior rate changes.
- \*\* Change in Company's premium level which will result from application of new rates.

Hanover Insurance Company			
Name of Con	npany		
FÉIN	13-5129825		
Judith E. Rider, Se	enior Pricing Analyst		
Official - Title			

Change in Company's premium or rate level produced by rate revision effective **July 15, 2005** 

	<u>Coverage</u>	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial	\$1,234,793	+1.2%
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial	\$386,547	-10.6%
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Workers Compensation		
Doe No.	• • • • • • • • • • • • • • • • • • • •	(territories) or certain classes? If so, s	pecify:

and CA-04-RMERU); revising our Loss Cost Multipliers. We are also revising our Schedule Rating from +/-25

- \* Adjusted to reflect all prior rate changes.
- \*\* Change in Company's premium level which will result from application of new rates.

to +/-40% and lower premium threshold eligibility to \$500.

Massachusetts Bay Insurance Company
Name of Company

FEIN

04-2217600

3

Judith E. Rider, Senior Pricing Analyst
Official - Title

(1)	(2)	(3)
G	Annual Premium Volume (Illinois)*	Percent
<u>Coverage</u>	volume (Illinois)*	Change (+ or -)**
1. Automobile Liability Private Passenger		
Commercial	40,667,243	+14%
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire 10. Extended Coverage		
11. Inland Marine		-
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		
Does filing only apply to certain  If so, specify: n/a	territory (territories)or	certain classes?
	territory (territories)or	certain classes?
If so, specify: n/a  Brief description of filing. (If	filing follows rates of a n): The only revision to submitted is a 14% in "Standard Rate" for a	an advisory the material being ncrease in the all three eligibility the "Casual Labor Only
If so, specify: n/a  Brief description of filing. (If organization, specify organization  * Adjusted to reflect all prior	filing follows rates of an): The only revision to submitted is a 14% in "Standard Rate" for a classifications for the Policy Rates" reflect rate changes.	an advisory the material being ncrease in the all three eligibility the "Casual Labor Only
Brief description of filing. (If organization, specify organization  * Adjusted to reflect all prior  ** Change in Company's premium le result from application of new	filing follows rates of an): The only revision to submitted is a 14% in "Standard Rate" for a classifications for the Policy Rates" reflect rate changes.  vel which will rates.  ANSGUARD INSURANCE COMPANY	an advisory the material being ncrease in the all three eligibility the "Casual Labor Only ted on page two.  OF AMERICA, INC.
Brief description of filing. (If organization, specify organization  * Adjusted to reflect all prior  ** Change in Company's premium le result from application of new	filing follows rates of an): The only revision to submitted is a 14% in "Standard Rate" for a classifications for the Policy Rates" reflect rate changes.  vel which will rates.	an advisory the material being ncrease in the all three eligibility the "Casual Labor Only ted on page two.  OF AMERICA, INC.
Brief description of filing. (If organization, specify organization  * Adjusted to reflect all prior  ** Change in Company's premium le result from application of new	filing follows rates of an): The only revision to submitted is a 14% in "Standard Rate" for a classifications for the Policy Rates" reflect rate changes.  vel which will rates.  ANSGUARD INSURANCE COMPANY	an advisory the material being ncrease in the all three eligibility the "Casual Labor Only ted on page two.  OF AMERICA, INC.
Brief description of filing. (If organization, specify organization  * Adjusted to reflect all prior  ** Change in Company's premium le result from application of new	filing follows rates of an): The only revision to submitted is a 14% in "Standard Rate" for a classifications for the Policy Rates" reflect rate changes.  vel which will rates.  ANSGUARD INSURANCE COMPANY Name of Company N	an advisory the material being ncrease in the all three eligibility the "Casual Labor Only ted on page two.  OF AMERICA, INC.

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